

## UTILITY PATENT APPLICATION TRANSMITTAL

(New Nonprovisional Applications Under 37 CFR § 1.53(b))

Attorney Docket No.  
022.0005 (1640)

EXPRESS MAIL #ER 311519316 US

## TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Transmitted herewith is the patent application of ( ) application identifier or (X) first named inventor, BRUCE A. WILLINS,  
entitled, for a(n):METHOD AND APPARATUS FOR AGGREGATION RECONCILIATION  
THROUGH HIERARCHICAL TAG CHECKSUMS

(X) Original Patent Application.

( ) Continuing Application (prior application not abandoned):

( ) Continuation ( ) Divisional ( ) Continuation-in-part (CIP)

of prior application No: \_\_\_\_\_ Filed on: \_\_\_\_\_

( ) A statement claiming priority under 35 USC § 120 has been added to the specification.

## Enclosed are:

(X) Specification: 10 Total Pages.(X) Claims: 7 Total Pages.(X) Abstract: 1 Total Pages.(X) Formal Drawing(s): 5 Total Sheets.

( ) Informal Drawing(s): \_\_\_\_\_ Total Sheets.

(X) Oath or Declaration:

(X) A Newly Executed Combined Declaration and Power of Attorney:

( ) Signed.

(X) Unsigned.

( ) Partially Signed.

( ) A Copy from a Prior Application for Continuation/Divisional (37 CFR § 1.63(d)).

( ) Incorporation by Reference. The entire disclosure of the prior application, from which a copy of the  
oath or declaration is supplied, is considered as being part of the disclosure of the accompanying  
application and is hereby incorporated herein by reference.

( ) Signed Statement Deleting Inventor(s) Named in the Prior Application. (37 CFR § 163(d)(2)).

( ) Power of Attorney.

( ) Associate Power of Attorney.

( ) A Check # \_\_\_\_\_ in the amount of \$0 for the Fees associated with this filing.

( ) Preliminary Amendment.

( ) A Duplicate Copy of this Form for Processing Fee Against Deposit Account.

( ) Information Disclosure Statement and Form PTO/SB/08A

(X) Return Receipt Postcard.

( ) Assignment and Recordation Cover Sheet.

( ) Other: \_\_\_\_\_

CLAIMS AS FILED				
FOR	NO. FILED	NO. EXTRA	RATE	FEE
Total Claims	37	17	\$18.00	\$306.00
Independent Claims	8	5	\$86.00	\$430.00
Multiple Dependent Claims (if applicable)				\$0
Assignment Recording Fee				\$0
Basic Filing Fee				\$770.00
Total Filing Fee				\$1506.00

Charge \$ 0 to Deposit Account 50-2091 pursuant to 37 CFR § 1.25.

Respectfully submitted,

By: 

Brett A. Carlson

Reg. No. 39,928

Date: 12/31/03

## Correspondence Address:

CUSTOMER NO. 29,906  
INGRASSIA FISHER & LORENZ, P.C.  
7150 E. Camelback Road  
Suite 325  
Scottsdale, AZ 85251  
Phone: 480-385-5060  
Fax: 480-385-506131353 U.S. PTO  
10/749795

123103



22764 U.S. PTO